

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766351

FILED
Apr 22, 2009
Secretary of State

Entity Name: TEMPLE ARON HAKODESH, INC.

Current Principal Place of Business:

TEMPLE ARON HAKODESH
4751 NW 24TH CT
LAUDERDALE LAKES, FL 33313

New Principal Place of Business:

Current Mailing Address:

TEMPLE ARON HAKODESH
4751 NW 24TH CT
LAUDERDALE LAKES, FL 33313

New Mailing Address:

FEI Number: 59-2256255

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LASH, NEIL
4751 N.W. 24TH CT.
LAUDERDALE LAKES, FL 33313 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: CREGAR, JONATHAN
Address: 6314 NW 74 AVE.
City-St-Zip: TAMARAC, FL 33321 US

Title: DS () Delete
Name: TRANCE, TADDEUS
Address: 4751 N. W. 24 CT.
City-St-Zip: LAUDERDALE LAKES, FL 33313 FL

Title: DP () Delete
Name: LASH, NEIL
Address: 1310 NW 76 AVE
City-St-Zip: FORT LAUDERDALE, FL 33322

Title: D () Delete
Name: VITKUS, JOE
Address: 7230 N.W. 44TH COURT
City-St-Zip: LAUDERHILL, FL 33319 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change () Addition
Name: GREENBERG, CARIN
Address: 6800 NW 5TH COURT
City-St-Zip: PLANTATION, FL 33317 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARIN M. GREENBERG

TREA

04/22/2009

Electronic Signature of Signing Officer or Director

Date